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PTO/SB/21 (02-04)  
Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/806,616	
	Filing Date	03/23/2004	
	First Named Inventor	Michael R. Brininstool	
	Art Unit	2883	
	Examiner Name	Peng, C. V.	
Total Number of Pages in This Submission	5	Attorney Docket Number	96105

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	STATUTORY INVENTION REGISTRATION (PTO/SB/22) (2 pgs)	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

**RECEIVED**  
**OIPE/IAP**  
**DEC 21 2005**

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	PETER A. LIPOVSKY, REG # 32,580
Signature	<i>Peter A. Lipovsky</i>
Date	29 NOV 05

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	VANDY L. LEHMAN		
Signature	<i>Vandy Lehman</i>	Date	11/29/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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# Request for Statutory Invention Registration

Application Number 10/806,616, or ☐ attached hereto  
Filed: 03/23/2004  
Applicant(s): MICHAEL R. BRININSTOOL  
Title: COILED OPTICAL BRAGG RADIATING APERTURE

- A. In the above identified patent application, I hereby:
1. Request and authorize the Director of the U.S. Patent and Trademark Office to publish the above identified regularly filed patent application as a Statutory Invention Registration. (35 U.S.C. 157)
  2. Waive the right to receive a United States patent on the same invention claimed in the above identified patent application. These rights, which are waived, include those specified in 35 U.S.C. 183 and 271 through 289 as well as all attributes specified for patents in any other provisions of law other than title 35, United States Code. The waiver includes, but is not limited to, the remedies under 19 U.S.C. 1337, 22 U.S.C. 2356 and 28 U.S.C. 1498. (35 U.S.C. 157(c))
  3. Understand that the above waiver will be effective pursuant to 37 CFR 1.293 upon publication of the Statutory Invention Registration to waive the inventor's right to receive a United States patent on the invention claimed in the Statutory Invention Registration. (37 CFR 1.293(b)(1))
  4. State that, in my opinion, the disclosure and claims of the above identified patent application meet the requirements of 35 U.S.C. 112. (37 CFR 1.293(b)(3))
  5. State that, in my opinion, the above identified patent application complies with the requirements for printing as set forth in the Rules of Practice for Patent Cases, 37 CFR Part 1. (37 CFR 1.293(b)(4))
  6. Enclose the fee set forth in 37 CFR 1.17(n) or (o) for requesting publication of a Statutory Invention Registration:

- ☐ A first Office Action has not been mailed in the above application, 37 CFR 1.17(n) (fee code 1804) \$ \_\_\_\_\_
- ☒ A first Office Action has been mailed in the above application, 37 CFR 1.17(o) (fee code 1805) \$ 1,840.00

Request fee \$ \_\_\_\_\_

## MINUS BASIC FILING FEE, IF PREVIOUSLY PAID

- ☒ Basic filing fee for utility patent application set forth in 37 CFR 1.16(a);
- ☐ Basic filing fee for design patent application set forth in 37 CFR 1.16(f); or
- ☐ Basic filing fee for plant patent application set forth in 37 CFR 1.16(g)  
Minus basic filing fee \$ 790.00

Amount due \$ 1,050.00

Payment charged to credit card \_\_\_\_\_. Form PTO-2038 is attached.  
Amount enclosed by check or money order \_\_\_\_\_  
Please charge Deposit Account No. 50-0847 the amount of \$ 1,050.00. A duplicate copy of this form is attached.  
If payment of any additional fee is required for publication of the Statutory Invention Registration, charge such amount to Deposit Account No. 50-0847. A duplicate copy of this form is attached.

\* Where this request is submitted at the time the application is filed, the filing fee is included in the fee.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 157. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 24 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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01 FC:1805 1070.00 DA

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B. For printing of the Statutory Invention Registration front page, if desired, list below the name(s) of not more than 3 registered patent attorneys and agents OR alternatively, the name of a firm having as a member a registered patent attorney or agent. If no name is listed below, no name will be printed on the Statutory Invention Registration.

PETER A. LIPOVSKY

MICHAEL A. KAGAN and ALLAN Y. LEE

C. Name of assignee, if any, for printing on the Statutory Invention Registration MICHAEL R. BRININSTOOL

Address (City and State or Country) LA JOLLA, CA, USA

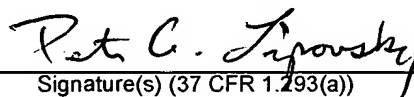
State of incorporation, if assignee is a corporation \_\_\_\_\_

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

The party or parties signing this form are:

☒ attorney or agent of record. Registration Number 32580

☐ applicant(s) and any assignee



Signature(s) (37 CFR 1.293(a))

PETER A. LIPOVSKY

Typed or Printed Name(s)

32580

Registration Number, if applicable

(619) 553-3001

Telephone Number

OICE 4P77  
DEC 08 2005  
PATENT & TRADEMARK OFFICE

PTO/SB/17 (12-04v2)  
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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,500.00

### Complete if Known

Application Number	10/806,616
Filing Date	03/23/2004
First Named Inventor	Michael R. Brininstool
Examiner Name	Peng, C. V.
Art Unit	2883
Attorney Docket No.	96105

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 50-0847 Deposit Account Name: SPAWARSSYSCEN SAN DIEGO

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets \_\_\_\_\_ Extra Sheets \_\_\_\_\_ Number of each additional 50 or fraction thereof \_\_\_\_\_ Fee (\$) \_\_\_\_\_ Fee Paid (\$) \_\_\_\_\_  
- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)  
Other (e.g., late filing surcharge): 2-mos ext & Req. for Statutory Invention Registration minus basic fee 450+1050

#### SUBMITTED BY

Signature	<i>Peter A. Lipovsky</i>	Registration No. (Attorney/Agent) 32,580	Telephone 619-553-3001
Name (Print/Type)	PETER A. LIPOVSKY		Date 28 NOV 05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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